



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2284

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/692,508	10/19/2000 RULE	455	2683	40690/CAG/B600

APPLICANTS

Stephen Wu, Los Angeles, CA;
 Hung-Ming Chien, Los Angeles, CA;
 Brima Ibrahim, Loa Angeles, CA;
 Ahmadreza Rofougaran, Marina Del Rey, CA;
 Meng-An Pan, Los Angeles, CA;

**** CONTINUING DATA *******

THIS APPLICATION IS A CON OF 09/634,552 08/08/2000
 WHICH CLAIMS BENEFIT OF 60/160,806 10/21/1999
 AND CLAIMS BENEFIT OF 60/163,487 11/04/1999
 AND CLAIMS BENEFIT OF 60/163,398 11/04/1999
 AND CLAIMS BENEFIT OF 60/164,442 11/09/1999
 AND CLAIMS BENEFIT OF 60/164,194 11/09/1999
 AND CLAIMS BENEFIT OF 60/164,314 11/09/1999 *
 AND CLAIMS BENEFIT OF 60/165,234 11/11/1999
 AND CLAIMS BENEFIT OF 60/165,239 11/11/1999
 AND CLAIMS BENEFIT OF 60/165,356 11/12/1999
 AND CLAIMS BENEFIT OF 60/165,355 11/12/1999
 AND CLAIMS BENEFIT OF 60/172,348 12/16/1999
 AND CLAIMS BENEFIT OF 60/201,335 05/02/2000
 AND CLAIMS BENEFIT OF 60/201,157 05/02/2000
 AND CLAIMS BENEFIT OF 60/201,179 05/02/2000
 AND CLAIMS BENEFIT OF 60/202,997 05/10/2000 *
 AND CLAIMS BENEFIT OF 60/201,330 05/02/2000

(*) Data inconsistent with PTO records.

**** FOREIGN APPLICATIONS *******

None M.M.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/18/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	48	103	6
Verified and Acknowledged	Examiner's Signature <i>M.M.</i> Initials <i>M.M.</i>				

ADDRESS

23363

TITLE

Adaptive radio transceiver with calibration

<input type="checkbox"/> All Fees

FILING FEE
RECEIVED
2574

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

- | |
|--|
| <input type="checkbox"/> 1.16 Fees (Filing) |
| <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| <input type="checkbox"/> 1.18 Fees (Issue) |
| <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Credit |



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